

COR Monthly Performance Report

ADMINISTRATIVE CENTER - Dallas

CONTRACT ODT-5-C-0003

TASK ORDER HSCEDM-17-F-00058

DESCRIPTION: Provide detention related services CONTRACTOR: Corrections Corporation of America

Safeguarding and care of detainees

For ICE San Diego Field Office.

MONTH: May

As the COR, you are responsible for receiving all deliverables, inspecting and accepting services provided in accordance with the terms and conditions of the contract. Please provide a monthly performance report within **10 days** after the end of each month.

CUSTOMER ORGANIZATION:	Location:	
U.S. DHS / ICE	7488 Calzada De La Fuente	
San Diego Field Office (Otay Detention Facility) Enforcement and Removal	San Diego, CA 92154	
COR'S NAME: ICE	TELEPHONE NUMBER: ICE	
Title: Deportation Officer/COR	FAX NUMBER: ICE	
Signature ICE	Date: June 6, 2018	

Scope of Work The requirement is for detention related services for ICE District's safeguarding and care of ICE detainees.

The services consist of a contractor furnished facility, personnel and services to provide a program of temporary residential care of detainee aliens of all nationalities in federal custody. The contractor shall provide detention related services (Contractor Owned and Contractor Operated) in San Diego, CA.

CONTRACTOR EVALUATION: Please evaluate the Contractor's performance in the areas described below by providing an appropriate rating and comments in numerical terms. Please briefly describe weaknesses and strengths. The ratings are defined as follows:		
☐ Outstanding	Contractor performance in this area exceeded contract requirements a significant amount of the time.	
☐ EXCELLENT	Contractor performance in this area consistently met and sometimes exceeded contract requirements.	
☐ SATISFACTORY	The Contractor generally met contract requirements in this area but experienced some problems.	
☐ MARGINAL	The Contractor experienced some significant problems in this area during contract performance.	
Unsatisfactory	Contractor performance failed to minimally meet the specifications.	

Comments: Comments may be included concerning all ratings. In particular for low, marginal or unsatisfactory ratings, it is requested that additional commentary and supporting documentation be included as attachments to this report.

QUALITY OF RESOURCES AND TECHNICAL SERVICES: Evaluate the Contractor's compliance with contract specifications.

- 1. Is the contract being performed in accordance with the contract standards?
- 2. Is the contractor performing all tasks identified in the contract in a timely, effective and efficient manner?
- 3. Training: All employees are trained prior to performing duties and receive required in-service training and proficiency testing?
- 4. **Personnel**: Is the contractor providing personnel staffing at the level expected by ICE? Does the Contractor maintain sufficient number of employees to provide adequate security and safety for detainees? (e.g. Guard to detainee ratio)

COMMENTS:

- No, the contract is not being performed in accordance with the contract standards. ICE
 Compliance Unit discovers several non-compliant findings each time they do an
 audit/walkthrough of the facility/pod/department. Please see attached supporting
 documentation for examples.
- 2. No, the contactor did not perform tasks identified in the contract in a timely, effective, and efficient manner:
 - Razors are not being properly disposed of by staff. Detainees are making claims that the razors they are receiving have already been used. This claim was brought to the media's attention.
 - Numerous non-compliant findings were encountered in the kitchen this month.
 The over-head spray nozzle had a weak water pressure. Due to this issue, the
 spray nozzle was covered with gloves and the hose was covered with plastic wrap
 in order for it to spray water with some degree of pressure. Facility food service
 management staff are not making their checks around the kitchen to identify
 issues.
 - Disciplinary reports are routinely returned for corrections. Reports must state facts clearly, precisely, and concisely. The ICE Compliance Unit is unable to submit accurate reports to HQ in a timely manner without the corrections requested from the contractor.

COMMENTS (CONTINUED):

- 3. All training continues to be conducted as specified in the contract (initial/yearly training).
- 4. No, the Contractor is not providing personnel staffing at the level expected by ICE:
 - The Contractor is still not staffed to assume the hospital supervision duties. ICE was informed on May 30, 2018, two weeks before the anticipated start date of June 11, 2018. The new date given by the Facility Administrator is now August 6, 2018, which is almost 6 months past the original take-over date of March 1, 2018. ICE expects to receive ample notice from the contractor regarding crucial matters.
 - The Safety Manager position has been vacant for almost 8 months now. The Contractor did not inform ICE of its plan to fill the vacancy. This position has been vacant for two important ICE audits (PBNDS and ODO), in which representation is needed.

RATING RECEIVED/RATIONALE: Satisfactory

Performance for the month of May was Satisfactory.

Use of Resources: Does the Contractor manage resources effectively and efficiently to insure quality service delivery to the government?

COMMENTS:

 No, Contractor is not managing resources effectively and efficiently to insure quality service delivery to the government. For example, Contractor is using Detention Officers to do Administrative Clerks' work or acting as the Law Library Coordinator. This puts the facility's security at risk. The facility could use these officers in other areas that need them the most.

RATING RECEIVED/RATIONALE: Satisfactory

Performance for the month of May was Satisfactory.

Compliance with National Detention Standards: Does the Contractor adhere to ICE Performance-Based National Detention Standards? Review the COR Contract Performance Monitoring Instrument for the current month and note any areas of deficiency, exemplary or best practices observed and any comments relevant to the monthly review period.

COMMENTS:

 Contractor occasionally adheres to ICE PBNDS. DSM and Compliance Unit Staff are continuously finding errors in the Contractor's work. Please see attached supporting documentation for examples.

RATING RECEIVED/RATIONALE: Satisfactory.

Performance for the month of May was Satisfactory.

OPERATIONAL KEY INDICATORS: Review the information and data submitted by the Contractor and note any trends or concerns.

COMMENTS:

ICE is concerned with the number of drivers reported who currently have CDL's. The
Chief of Security originally reported 28 drivers. However, when the transportation
hours report was shared with ICE, it revealed the unit only has 20 officers who are
CDL qualified.

RATING RECEIVED/RATIONALE: Satisfactory.

Performance for the month of May was Satisfactory.

EQUIPMENT CAPABILITY: Has the contractor provided and maintained a sufficient amount of serviceable equipment for the proper performance of the assigned contract tasks.

COMMENTS:

1. Yes, the contractor has maintained sufficient equipment to accomplish the mission.

OVERALL RATING RECEIVED/RATIONALE: Satisfactory

Performance for the month of May was Satisfactory.

CORPORATE COMMITMENT: Evaluate the effectiveness of the company's problem-solving techniques. When a problem is identified, does the contractor respond promptly and effectively to solve the problem? Were you the customer satisfied with the problem resolution?

COMMENTS:

- ICE submits weekly reports to the contractor that identifies non-compliant findings around the facility. The Contractor failed to respond to two requests by the due date given.
- No, the Contractor is not providing personnel staffing at the level expected by ICE.
 The government needs the contractor to assume responsibility of the hospital
 supervision duties as soon as possible. It is creating conflict with the other
 contractor involved in this task. Postponing the responsibilities for almost 6
 months is unacceptable.
- No, the customer is not satisfied with the problem resolution. The same errors are continually detected by the ICE Compliance Unit each month.

RATING RECEIVED/RATIONALE: Satisfactory

Performance for the month of May was Satisfactory.

CUSTOMER SATISFACTION: Evaluate the end users' overall satisfaction with the Contractor's service in terms of providing high quality services in a timely and cost-effective manner. Please provide a summary of the overall performance of the contractor.

COMMENTS:

- 1. Overall, customer satisfaction remains unacceptable. The contractor has not demonstrated continuous flexibility in order to accommodate ICE needs.
- 2. The contractor did not continue to implement policies and procedures. Staff is presumably held "accountable." However, the non-compliant findings seem to continue and there are no corrective action measures in place to prevent them from occurring.

Comments (Continued):		
3. The communication between the contractor and government needs to be improved. The contractor does not immediately notify the government regarding pertinent issues or concerns until the government discovers them and inquires with the contractor.		
OVERALL RATING RECEIVED/RATIONALE: Satisfactory		
Performance for the month of May was Satisfactory.		
Summary of Performance Rating/Rationale: Satisfactory		
COR NAME & SIGNATURE	Date:	
ICE	June 6, 2018	

From:	ICE
Sent:	Thursday, May 3, 2018 10:26 AM
To: Cc:	ICE
Subject:	Non-Compliant Findings Apr 30 - May 4, 2018

While reviewing the many areas of the facility, I encountered the following non-compliant areas:

- Personal Information PC packet had an incorrect word on the second page of the investigation and the detainees identified to keep separate were not entered on the sections identified to keep separate.
- Personal Information did not have a supervisor signature on the personal property form.
- Personal Information did not have the Officer initials on the Watch log indicating they performed a safety and security check
- Personal Information was released early from the SMU and there is no supporting documentation to show that the detainee is housed in the SMU under administrative segregation for voluntary PC.
- Personal Information | Personal Information
- Personal Information Confinement Activity Records did not have a medical staff printed name showing they visited the detainee on 4/17/18.
- Personal Information Personal Information did not have Detention staff printed name on the CAR for 4/9/18 and 4/15/18.
- Personal Information had to cell contract sheets that were not closed out.
- Detainees were not seen within 2 hours of placement in medical hold rooms. Detainees were placed in the hold rooms on 4/30/18 at 0635 and were seen at 0849, 0917 and 0927.
- There are 17-18 missing "time seen, time out" entries in the medical hold room logbook.
- There was a missing out time in the medical hold room logbook for 4/29/18.
- The daily medical inspection logbook had the daily inspections for 4/18 and 4/28/18; however, it did not contain the name of the staff member performing the inspection.
- There were no ICE Staff Detainee Request form available for the ICE detained population in A Pod.
- Personal Information |, Personal Information and Personal Information did not have both annual dental and PE exams scheduled. Notified the charge nurse and they were scheduled.
- Personal Information SAAPI worksheet was not filled out.

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- The Post Orders in D SMU contain memorandums dating back to 2016, that have to be incorporated into the
 post orders.
- Personal Information | completed IDR#1779 was not filed in the detention file.
- Could not locate the SDDOs signatures assigned to visit A, C1, C2, E Pod, J Pod Apr 23-25, 2018. Please ensure SDDOs visit the Pods on their assigned days.
- There were no grievances available for the ICE detained population in J Pod on 4/29/18.
- There was a missing "out time" in the discharge logbook for 4/27/18.
- There was a missing "age" in the ICE Holding cell logbook for 4/24/18.
- There was a missing "out time" in the hold room logbook for 4/26/18.
- There were 13 missing "out times" in the R&D Records Check out logbook for 4/24/18. 10 missing "out times" for 4/25/18.

- Computer #3 in K Pod is not working.
- Personal Information complained that he was given disciplinary segregation time for allegedly threatening staff as the detainee claims he was simply asking for his religious meal. Detainee was going to submit an IDR to ICE for resolution.

Please follow-up and let me know when the areas are rectified so that I can close out on my end.

Thanks for the support.

Į ICE	
From: Sent:	ICE Thursday, May 10, 2018 11:30 AM
То:	ICE
Cc: Subject:	Non-Compliant Findings May 7-11, 2018

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While reviewing the many areas of the facility, I encountered the following non-compliant areas:

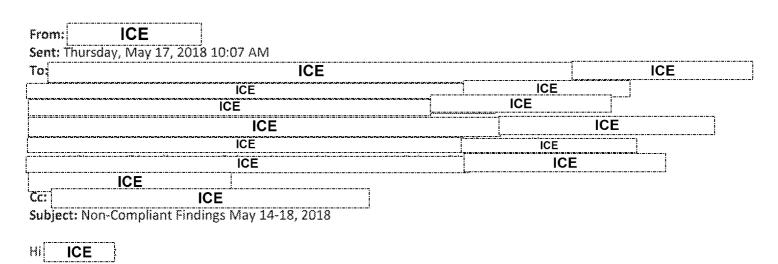
- Personal Information disciplinary report was not clear and concise. Staff stated that the detainee observed a fight and after reviewing milestone video, the Officer observed a detainee slapping the hand of another detainee. SMU Sergeant was going to address the issue with the DHO.
- Personal Information needs an updated monthly memo to continue detention in the SMU. The SMU Sergeant was going to generate the memo for the Warden's signature.
- Personal Information & Personal Information | Investigation Report was missing the Supervisors title. The SMU Sergeant was going to fix this.
- Personal Information was missing the disciplinary report for the 307 charge that was dropped and then changed to administrative segregation. The SMU Sergeant was going to add the disciplinary report to the folder.
- Personal Information did not have the medical staff printed name on the CAR. The SMU Sergeant sent an email to the HSA with a scanned copy for corrective action.
- Personal Information was missing the date next to the Officer name on the Detainee Rights at the IDP. The SMU sergeant was going to annotate the date.
- Could not locate the SDDO signatures in A, C1, C2, D, E, G, K, N, P and Medical Pods / Units for Apr 30 May 2, 2018.
- Personal Information was missing the I-203 in the detention file.
- There was no daily medical inspection for 5/7/18. Staff did not complete the daily inspection for 4/26/18. Notified the charge nurse.
- There was a dirty glove in the detainee hand washing station next to the walk-in cooler. Notified the Food Service Foreman.
- There were no paper towels at the detainee hand washing station next to the entrance to the east dining hall. Notified the Kitchen Officer.
- There were shoes on top of the wall separating the detainee designated area and the food trays. Notified the Kitchen Officer and Food Service Foreman.
- Missing telephone requests and grievance forms in G Pod. Notified the Pod Officer.
- Detainees were not seen within 2 hours of being placed in the medical hold rooms on 5/7/18. Detainees were placed in the hold rooms at 0635, (3) 0642, and 0650 and were seen at 0951, 0940, 0927, 0904 and 1037.
- The 2 over-head spray nozzles in the dish washing area (east and west) have rubber gloves tied around the
 nozzle. Detainees state that the over-head spray nozzle next to the dishwasher does not have enough water
 pressure. Notified the Kitchen Officer.
- There is a urinal out of service in N Pod.
- Personal Information | complained that he was visually searched after a contact legal visit on May 6, 2018 at 12 pm. Please look into.

Please follow-up and let me know when the areas are rectified so that I can close out on my end.

ICE

Subject:

RE: Non-Compliant Findings May 14-18, 2018



While reviewing the many areas of the facility, I encountered the following non-compliant areas:

- Personal Information and Personal Information Watch Logs did not have 30 min checks documented for 5/6/18 between 1400 and 1510 hours and 5/13/18 from 2200 2315. Notified SMU Sergeant.
- Personal Information did not have the disciplinary report for the 299 charge. The Confinement Record and Disciplinary Segregation Order was in the folder. Notified SMU Sergeant.
- Personal Information | did not have a staff signature on the chain of custody form in the SMU folder. Notified SMU
 Sergeant.
- There were no Package Authorization, Indigent, Grievances and Request for Assistance forms available for the ICE detained population in G Pod on 5/13/18 and 5/17/18. Notified Pod Officer.
- There were missing out times in the C2 SMU Visitor Logbook, for 5/12-5/13/18. Notified Pod Officer.
- The waking hours for detainees to use the telephone and the ability to obtain an unmonitored call were not posted at the phone banks in H Pod on May 13, 2018. Notified Pod Officer.
- There was an unlabeled spray bottle in the Food Service Kitchen. Notified the AFSA.
- The vent located in the mop bucket area has been damaged and needs to be replaced. Notified the AFSA.
- Detainees are not aware of which color coded cutting boards to use when cutting raw and cooked foods to prevent cross-contamination. Notified the FSA.
- The Medical Hold Room logbook has several missing entries such as the date placed in the hold room, time out
 of the hold room, the age of the detainees and lines going down two columns instead of filling them in. Notified
 facility staff.
- Tracking the sugar a special handling item has not been occurring. A shipment was received and the tracking inventory sheet was not updated. Notified the FSA.
- The ice scooper in the food service kitchen is not being sanitized daily and remains in the ICE machine instead of in the holder. Notified the FSA.
- Left-over food in the food service kitchen is not being labeled. Notified the FSA.
- Food Service staff have no way of tracking which moist cloths are being used for the food serving lines and for cleaning. Notified the FSA.
- There is a paper towel dispenser missing from N Pod.

Please follow-up and let me know when the areas are rectified so that I can close out on my end.

Thanks for the support.

ICE Thursday, May 17, 2018 12:45 PM
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ICE
Non-Compliant Findings: Food Service Kitchen (16MAY2018)

Good Afternoon All,

ICE

Please see below non-compliant areas that were encountered yesterday, May 16th in the kitchen:

- There are no Over-head vent covers to prevent dust particles from coming into contact with the food on the serving lines.
- The floor drain covers were not attached to the floor drains in the kosher kitchen.
- The sink was clogged.
- There was low water pressure in the over-head spray nozzle; maintenance was on-site to fix it.
- The faucets at the dish washing stations are leaking water.
- The duct tape on the dishwasher is coming apart.
- Left-over food was not labeled.
- There are color coded cutting boards, inmates were not sure which ones to utilize to prevent crosscontamination.
- There are no sneeze guards on the serving line.
- Air Curtains are located outside the facility at the back dock, but there are no black lights or other alternatives to prevent flies from being in the kitchen.
- There were workers who have beards who failed to cover their beard with a net.
- There was spilled water in the janitor's closet. The closet was not in use at the time of the discovery.
- Brooms placed in a trash can / container, with the broom brushes upright, were in close proximity to pots and pans.
- Kitchen personnel was unable to report how often the ice scooper is sanitized. (The scooper is utilized daily, thus sanitation should be required daily.)
- There were a few soiled rags at the corner of the ice dispenser.
- Information recorded on the Inventory form for sugar (a controlled item) for 16MAY2018 did not match the packages shelved.
- Several items on shelves in the storage room(s) were not separated 3 inches from the wall.
- There was an entire cart filled with trays with coffee cake with a sign indicating they were scheduled to be consumed on 12MAY2018. It was already 16MAY2018.
- There were several pairs of oven gloves hung on hooks whose appearance was difficult to determine if they
 were clean or dirty.
- Kitchen workers voiced their concern that gloves are not long enough to prevent being burned while preparing food in the oversized pots.
- There were several buckets filled with dirty water and soiled rags left unattended in several areas of the kitchen.
- There were unlabeled food trays in the refrigerator area.
- There were several trays filled with food, which were not properly sealed.
- A USM inmate / worker was unfamiliar with how to exit a refrigerator / freezer if & when locked in.
- Rags left in several areas were difficult to determine if they were clean or soiled.

- The legs / bottom of the SRM80 Mixers are rusted.
- The floor underneath the serving line was not cleaned.
- Sugar / sugar substitute packets were detected on the preparation tables. ****Sugar is a controlled item and cannot be left unattended.****
- The ceiling is not clean in appearance.
- There was a bucket filled with dirty water and soiled rags in close proximity to clean meal trays.

Please advise of the progress on the non-compliant findings below that require action by COB, May 24th.

Thank you,

	ICE	
••	Contracting Officer	's Representative
	DHS/ICE/ERO	
	Otay Mesa Detenti	on Center
	Office: ICE	
,	Cell: ICE	
ĺ	ICE	

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ICE

From: Sent:

Subject:

ICE

Thursday, May 24, 2018 1:32 PM

To: Cc:

IC

FW: Non-Compliant Findings May 21-25, 2018

Good Afternoon All,

Please advise on the progress of the non-compliant findings below by COB, Thursday, May 31st.

Thank you,

ICE

Contracting Officer's Representative

DHS/ICE/ERO

Otay Mesa Detention Center

Office: ICE
Cell: ICE

ICE

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From:	ICE						
Sent: Thurso	day, May 24, 20	11:48	AM				
To:		ICE			ICE		
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	ICE	i i		[(CE		
	ICE		,	ICE			
Ĺ,	ICE			ICE			
	ICE						
Cc:		ICE					
Subject: No	n-Compliant Fir	ndings Ma	v 21-25, 2018				

H ICE

While reviewing the many areas of the facility, I encountered the following non-compliant areas:

- Personal Information needs a detainee signature on the rules and regulations form for the SMU. Notified the SMU Sergeant.
- Personal Information missing staff initial on the 30 minute watch log for 5/22/18. Notified the SMU Sergeant.
- Personal Information did not have medical printed name on the Confinement Activity Record for 5/8/18. Notified the SMU Sergeant.
- Personal Information did not have a signature on the STG memo in the SMU folder. Notified the SMU Sergeant.
- Personal Information missing the facility code violation on the IDP. Notified the SMU Sergeant.
- The right side of the walk-in cooler in the Food Service Kitchen was left unlocked on 5/20/18.
- Personal Information needs a UDC signature on the UDC paperwork. Left the detention file on the Records Supervisor desk for correction.
- The Food Service Kitchen had trash, used trays / pans with food, gloves, goggles and dirty rags laying on the floors / sinks on 5/20/18. Pictures taken and sent to FSA.
- The medical hold room logbook showed that 3 detainees were not seen within 2 hours of being placed in them. There were 2 entries that did not contain the detainees age. 3 missing section when the detainee was seen and 4 missing sections of when the detainee was placed in the hold rooms.
- Detainees in K Pod complained again stating that they are receiving used razors. Notified ICE. COS and UM staff held a town hall to address the issue good job!
- Personal Information housed in the SMU complained that he was discriminated against as he was being processed in admission. Notified ICE staff for resolution.
- The middle video visitation room in the lobby does not have a camera to prevent any indecent exposure from transpiring by the detainee family members. The Lobby Officer is often busy to where they cannot look into the visitation area to deter this behavior. Please look into.

Please follow-up and let me know when the areas are rectified so that I can close out on my end and if I overlooked any areas.

Thanks for the support.

ICE		99999
То:	ICE	20000
Cc:		
Subject:	RE: Non-Compliant Findings May 28 - Jun 1, 2018	
From ICE Sent: Thursday, May 31, 20		
To:	ICE	· - ··
	ICE	
Cc: Subject: Non-Compliant Fin	ICE dings May 28 - Jun 1, 2018	
Hi ICE		

While reviewing the many areas of the facility, I encountered the following non-compliant areas:

- Personal Information did not have the IDP packet in the SMU folder for a 298 charge where the detainee was sanctioned to 15 days in disciplinary segregation. Left notes for the SMU Sergeant.
- Personal Information did not receive the yellow copy of the person property form upon arriving to the SMU. The yellow copy in the SMU folder. A memo should be placed in the file indicating the detainee is housed in the SMU pending housing. Left notes for the SMU Sergeant.
- Personal Information did not have a IDP Packet in the SMU folder. There were 3 other DRs in the SMU folder with no disposition. The is no indication if the detainee was at the outside hospital or in the safety cell. Left notes for the SMU Sergeant.
- Personal Information did not have the disciplinary segregation order closed out. The detainee completed the segregation time on May 25, 2018. Current Memo in the SMU folder states that detainee will remain in the SMU until staff can be interviewed as the detainee threatened staff (medical staff). Memo also states that medical and mental health have no issues of returning the detainee to GP memo contradicts the reason the detainee is still housed in the SMU. Left notes for the SMU Sergeant.
- Personal Information | missing Supervisors title on the investigation report. Missing staff initials on 30 minute watch logs. Left notes for the SMU Sergeant.
- Personal Information and Personal Information did not have both annual PE and dental exams scheduled. Notified the charge nurse.
- The following logbooks were missing in E Pod SMU overflow: day room, confinement review and leisure. Where are detainees going to recreation while housed in the E Pod SMU overflow? Notified the SMU Sergeant.
- The over-head spray next to the dishwasher had plastic wrapped around the cord and there was a stream of water that was coming out of the cord. Notified the Kitchen Officer, FSA and ICE staff.

Please follow-up and let me know when the areas are rectified so that I can close out on my end and if I overlooked any areas.

Thanks for the support.

ICE	
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From: Sent:	
To:	
<i>a</i>	ICE
Cc: Subject:	FW: Errors detected: Protec <u>tive Custody Investigation</u> : Personal Information
Attachments:	2018_05_15_11_31_27.pdf; Personal Information (SMU STATUS).pdf
Importance:	High
Good Morning All,	
Please see below and submit th	e corrected documentation by 3pm today, May 16 th .
Thank you,	
titum you,	
ICE	
ICE	
Contracting Officer's Represent DHS/ICE/ERO	ative
Otay Mesa Detention Center	
Office: ICE	
Cell: ICE ICE	
IOL	<u>.</u>
public release under the Freedom and disposed of in accordance with	SSIFIED//FOR OFFICIAL USE ONLY (U//FOUO). It contains information that may be exempt from of Information Act (5 U.S.C. 552). It is to be controlled, stored, handled, transmitted, distributed, a DHS policy relating to FOUO information and is not to be released to the public or other "need-to-know" without prior approval of an authorized DHS official. No portion of this report
silvers se ministres to the includ,	Care or writer as repair tarill
From: ICE	
Sent: Wednesday, May 16, 201 To:	8 10:18 AM
Cc:	ICE
Subject: FW: Errors detected: P	ICE rotective Custody Investigation: Personal Information
Good morning ICE	<u> </u>
ACCOMMONME ICE	

Please note The Protective Custody Investigation was returned to CORE CIVIC Personnel for amendments on 15MAY2018. The attached documentation, the revision, "Personal Information (SMU STATUS)" is a bit unclear. The Investigative Official recommended Involuntary Protective Custody (PC). PC was approved by the Chief of Security (COS).
The Confinement Record dated 09MAY2018 and the Memorandum dated 14MAY2018 both reveal that Detainee was placed under Involuntary Administrative Status not Involuntary PC, as reflected on the PC Investigation Packet.
In the original documentation the COS annotated on section XII: Administrative Review that the detainee was to be placed under "Voluntary Administrative Status". Since the facility proposed to separate the detainee from General Population, it was suggested to change "involuntary" to "voluntary". That was accomplished, however, the decision on the revision reflects PC not Administrative, as originally determined.
The documents need to be uniform, they either need to ALL reflect PC Status or ALL indicate Administrative.
Kindly review. If deemed appropriate, please forward to CC Personnel. Amended documentation will be appreciated ASAP, as the documents need to be scanned into SRMS.
Should any concerns arise, please do not hesitate to advise.
Thank you, ICE
Respectfully,
ICE DHS/ICE/ERO
Otay Mesa Detention Center
San Diego, CA
Office ICE
Warning: This document is UNCLASSIFIED//FOR OFFICIAL USE ONLY (U//FOUO). It contains information that may be exempt from public release under the Freedom of Information Act (5 U.S.C. 552). It is to be controlled, stored, handled, transmitted distributed, and disposed of in accordance with DHS policy relating to FOUO information and is not to be released to the public or other personnel who do not have a valid "need-to-know" without prior approval of an authorized DHS official. No portion of this report should be furnished to the media, either in written or verbal form.
From: ICE Sent: Tuesday, May 15, 2018 12:28 PM
To: ICE
ICE
Cc: ICE ICE
2

ICE

Subject: Errors detected: Protective Custody Investigation: | Personal Information

Good afternoon CORE CIVIC Team:

Please note the attached documentation pertaining to Detainee Personal Information There were errors detected; amendments are necessary to facilitate entering accurate information into the Segregation Review Management System (SRMS) data base.

The Protective Custody (PC) Investigation, Form 10-1B, reveals that "Staff" is the requesting party. The investigation resulted in placing Detainee Personal Information under Voluntary Administrative Segregation, by the Chief of Security (COS). Kindly provide clarification. Since, the supporting evidence reveals that Detainee Personal Information was placed under Administrative Segregation, at the petition of the CORE CIVIC (CC) Detention Officer, should placement not be deemed "Involuntary"?

Disruptive Group Members- Write the title in upper-case letters or lower-case letters throughout the entire document. Do not use both upper and lower case.

The detainee's complete name should be written, at minimum, in the beginning of the any report / summary etc.

The remainder of the errors were simple grammatical errors; please ensure that the corrections are made.

Clean, unmarked copies of the attached documents are preferred. However, if furnishing clean, unmarked copies is infeasible, any hand-written modifications to original documentation must be initialed by the correcting party. Please ensure to place amended documentation in the corresponding SMU Folder. The documents submitted into the SRMS must mirror content of the SMU Folder.

Copies of the amended documentation will greatly be appreciated by 3pm, today, 15MAY2018, as the case requires entry into the ICE SRMS date base today.

Should any concerns arise, please do not hesitate to advise.

Thank you,

Respectfully,



DH5/ICE/ERO

Otay Mesa Detention Center

San Diego, CA

Office:

ICE

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ICE	
ICC	
From:	ICE
Sent:	Friday, May 18, 2018 7:21 AM
To:	ICE
	ICE
Cc:	CW. Assembly terroring Errors datacted on Dissiplinant Documentation
Subject: Attachments:	FW: Personal Information Errors detected on Disciplinary Documentation 2018_05_17_13_42_01.pdf
5"6 6 6 6 6 6 6 5 6 5 7 2 to 6 3 6 to 6 0	
Importance:	High
V a.a. a. a. v 01	
Good Morning All,	
Please see helow necessary o	orrections due by 12pm today, May 18 th .
s somboling recovery sources sources and security of the sources o	The constitution of the co
Thank you,	
IOE	
ICE	
Contracting Officer's Represe	ntative
DHS/ICE/ERO	
Otay Mesa Detention Center	
Office: ICE Cell: ICE	
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ICE	
Warning: This document is UNCL	ASSIFIED//FOR OFFICIAL USE ONLY (U//FOUO). It contains information that may be exempt from
public release under the Freedor	m of Information Act (5 U.S.C. 552). It is to be controlled, stored, handled, transmitted, distributed,
•	ith DHS policy relating to FOUO information and is not to be released to the public or other
	id "need-to-know" without prior approval of an authorized DHS official. No portion of this report a, either in written or verbal form.
STANK WE CHICKEN TO 100 COMMO	g colored in Mixion we workers with
From: ICE	
Sent: Thursday, May 17, 2018	1:59 PM
То:	ICE
Cc: 1	ICE
Subject: Personal Information France	detected on Disciplinary Documentation
L	accessed on Disciplinary accessions
Good afternoon ICE	
t	!
	hed Disciplinary Documentation prepared on behalf of detainee Personal Information note the
errors detected. If deemed a	opropriate once reviewed, please forward to CORE CIVIC (CC) Management Personnel for

corrections. Amendments would be appreciated by tomorrow noon, as the case requires entry into the SRMS tomorrow.

Disciplinary Documentation in Reference to the 210 violation: Adulteration of Food or Drink:

Officers and Supervisory Personnel failed to annotate their respective titles.

Copies of the photographs interfiled in the SMU Folder are extremely dark; one cannot distinguish what was photographed. Indistinguishable items cannot be used as evidence. ****Clear copies should be interfiled and provided with revision to ICE Compliance.****

In the Institution Disciplinary Panel (IDP) Report for the 210 violation, section VII: Reason for Sanction of the or action taken the Disciplinary Hearing Officer (DHO) stated, "This detainee was admitted to segregation previously for assaulting detainee Personal Information and it was concluded that during the time of the assault, Detainee Personal Information was under the influence of alcohol." ***There is no mention of Detainee Personal Information being under the influence of alcohol at the time of the assault, throughout the entire Disciplinary Report for the 101 Violation.***

Disciplinary Documentation in Reference to the 101 violation: Assault:

Officers and Supervisory Personnel failed to annotate their respective titles.

There are grammatical errors throughout the body of the Description of Incident Report.

In the statements provided in the Investigation Report, the Investigating Officer failed to identify the detainee interviewed.

Copies of the photographs interfiled in the SMU Folder are extremely dark; one cannot distinguish what was photographed. Indistinguishable items cannot be used as evidence. ****Clear copies should be interfiled and provided with revision to ICE Compliance. ****

Thank	you,
ICE	

Respectfully,



DHS/ICE/ERO

Otay Mesa Detention Center

San Diego, CA

Office: ICE

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ICE	
From: Sent: To: Cc: Subject: Attachments:	Friday, May 18, 2018 7:49 AM ICE FW:[Personal Information]: ERRORS DETECTED IN DISCIPLINARY DOCUMENTATION 2018_05_17_15_02_29.pdf
Good Morning All,	
Please see below necessary c	orrections due by <u>Tuesday, May 22, 2018</u> .
Thank you,	
Contracting Officer's Represe DHS/ICE/ERO Otay Mesa Detention Center Office: ICE Cell ICE ICE	ntative
public release under the Freedor and disposed of in accordance w personnel who do not have a val	ASSIFIED//FOR OFFICIAL USE ONLY (U//FOUO). It contains information that may be exempt from m of Information Act (5 U.S.C. 552). It is to be controlled, stored, handled, transmitted, distributed, ith DHS policy relating to FOUO information and is not to be released to the public or other id "need-to-know" without prior approval of an authorized DHS official. No portion of this report a, either in written or verbal form.

From	ICE			
Sent: Thursday, May 17, 2018 3:49 PM				
To: Cc:		ICE		
· · · · · · · · · · · · · · · · · · ·		ICE		
ICE Subject: Personal Information ERRORS DETECTED IN DISCIPLINARY DOCUMENTATION				
Good afterr	oor ICE			

Please make note of the attached Disciplinary Documentation prepared on behalf of detainee Personal Information | note the errors detected.

If / when deemed appropriate, kindly forward to the CORE CIVIC (CC) Management Team and or the ICE ERO Management Team for appropriate action. Amendments will be appreciated no later than Tuesday 22MAY2018.

On the Incident of Prohibited Acts and Notice of Charges, in the upper-right-hand corner the "time of incident" does not match the "time" the reporting officer reveals in the body of the report.

The "Description of Incident" contains several words which are difficult to decipher.

In the "Investigative Report" there were errors in the choice of words used.

The Reviewing Party failed to annotate his/her name and title as required.

In the UDC Report, in the area of the "Committee Action" the author stated "... Personal Information was aggressive toward me." The author failed to identify who is "me".

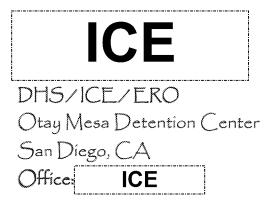
On the IDP Report, there were corrected items; the corrections need to be initialed.

CC Personnel must ensure that Detainee recombined is provided with copies of any revised documentation to which he is entitled. CC Personnel must ensure that copies of any revised documentation is interfiled in the SMU folder and that a copy is furnished to ICE/ERO Compliance.

Any assistance rendered will greatly be appreciated.



Respectfully,



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ICE			
From: Sent: To: Cc:	ICE Wednesday, May 23, 2018 6:49 AM ICE ICE ONLY CONTRIBUTION OF VIEWS ANALYZONA		
Subject:	FW: CONFINEMENT REVIEWS 18MAY2018		
Importance:	High		
Good Morning, Please advise of the progress on the non-compliant findings below that require action by COB, May 25th. Thank you,			
Contracting Officer's Representative DHS/ICE/ERO Otay Mesa Detention Center Office: ICE Cell: ICE ICE			
Warning: This document is UNCLASSIFIED//FOR OFFICIAL USE ONLY (U//FOUO). It contains information that may be exempt from public release under the Freedom of Information Act (5 U.S.C. 552). It is to be controlled, stored, handled, transmitted, distributed, and disposed of in accordance with DHS policy relating to FOUO information and is not to be released to the public or other personnel who do not have a valid "need-to-know" without prior approval of an authorized DHS official. No portion of this report should be furnished to the media, either in written or verbal form.			
From: ICE Sent: Friday, May 18, 2018 12:46 PM To: ICE			
Subject: FW: CONFINEMENT REVIEWS 18MAY2018			
Good afternoon ICE			
Please review the information conveyed by Detainees currently housed in the Special Management Unit (SMU) during confinement Reviews on 18MAY2018. When deemed appropriate, kindly forward the information to CORE CIVIC Management Team, ICE/ERO Management Team and The IHSC Health Service Administrator.			
During Confinement Reviews on Friday 18MAY2018 Detainee Personal Information reported the following concerns.			

FOR CORE CIVIC TO ADDRESS:

Personal Information

Detainee Personal Information communicated that his radio was confiscated, in light of Disciplinary Proceedings. The detainee stated that there are other detainees, who are also forgoing Disciplinary Proceedings who have been permitted to keep their radios. The detainee feels discriminated, as he deems it unfair that there are people who are in his same situation, all subject to disciplinary status yet they are not all deprived of the use of their radio. Detainee Personal Information expressed his desire to be offered an explanation as to why he is not authorized possession of his radio, while serving his time in the Special Management Unit (SMU). The Detainee requested that cells be searched and anyone undergoing Disciplinary Proceedings should have their radio confiscated as well.

Detained Personal Information related that the original reason for placement in the SMU was consequent to an altercation, which he maintained he did not initiate. The Detainee alleges that the other party was in fact the instigator and that he was simply defending himself. The Detainee stated that the alleged victim was released, yet he was in fact the initiator. Detainee Personal Information requested that video footage be reviewed to prove that he (Personal Information) was simply defending himself.

Detainee Personal Information informed this author that he appealed / grieved the most recent Disciplinary Reports he received and he has yet to receive a response from either the appeals nor the grievances.

Detained Personal Information indicated that the purpose for his agitation and why he lost his composure last night, was because an officer refused to give him hot drinking water. The water was later provided by a Captain. Names were not disclosed.

FOR IHSC TO ADDRESS:

Detainee Personal Information conveyed that he has seen a Psychologist at least 10 times. He averred that he has multiple gunshot wounds throughout his body. He suffers of insomnia, because he fears falling asleep, as he has nightmares about the shooting incident every time he sleeps. Detainee Personal Information is requesting to see a Psychiatrist. He indicated that he is not currently receiving any medication for his mental issues. Detainee would like to receive medication for his mental issues and to help with the insomnia. The Detainee reported that he has been taken to the safety cell multiple times for suicide attempts. He would like to know why no one is doing anything to help him.

FOR ICE/ERO TO ADDRESS:

Detainee Personal Information further reported that his request for Parole was denied and that he was informed that the purpose for the denial was consequent to a Probation Violation. The Detainee averred that the reason for the Probation Violation was due to the fact that he was Removed to Personal Information and that he filed a Request for Reconsideration of Parole, which has gone unanswered.

Personal Information

FOR CORE CIVIC TO ADDRESS:

Detainee Personal Information | Conveyed that he has been in the SMU for over 60 days and he has yet to be offered the opportunity to call his father. He indicated that both ICE/ERO and CC are aware that he desires the phone call and neither party has given him the opportunity to call. The Detainee seeks consideration of being able to work, in order that he may raise money to afford him the opportunity to make phone calls. If evidence reveals that Detainee | Personal Information | has been afforded the opportunity to make phone calls, in order to dispute the allegation? He should be entitled to one twenty(20) minute phone call every thirty (30) days. Is there any record that the phone calls were offered? If phone calls were placed and the recipient did not respond, was Detainee | Personal Information | Offered opportunities to place

subsequent phone calls? The attempts should not constitute a completed call, unless communication was established.

Detainee Personal Information is requesting to be relieved of restraints. He would like to know if due to his improved behavior, the restraint restriction can be lifted.

ERO MANAGEMENT AND CORE CIVIC MANAGEMENT TO ADDRESS:

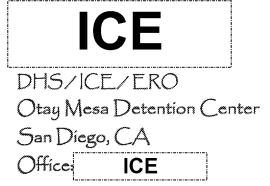
Detainee Personal Information requested consideration of a transfer to an alternate facility and if a transfer is infeasible, the Detainee solicited release to General Population.

Kindly have all parties respond to the conveyed concerns at the earliest possible opportunity. Both detainees have a history of losing their composure when they sense that their concerns are not addressed.

Thank you,

ICE

Respectfully,



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ICE		
From: Sent:	ICE Friday, June 1, 2018 8:03 AM	
To: Cc:	ICE	
Subject:	FW: NON-COMPLIANT FINDINGS: SMU FOLDERS 31MAY2018	
Good Morning,	n the progress of the non-compliant finding by COB Friday, June 7, 2018.	
i icase see nerow and advise of	rene progress or the non-compliant intains by Cob rinady, same 1, 2020.	
Thank you,		
Contracting Officer's Representative DHS/ICE/ERO Otay Mesa Detention Center Office: ICE Cell: ICE		
personnel who do not have a valid "need-to-know" without prior approval of an authorized DHS official. No portion of this report should be furnished to the media, either in written or verbal form.		
From: ICE Sent: Friday, June 1, 2018 7:24	AM	
To: Cc:	ICE	
	ICE	
ICE Subject: NON-COMPLIANT FINDINGS: SMU FOLDERS 31MAY2018		
Good morning ICE		
Please note, the non-compliant findings detected while reviewing folders in the Special Management Unit (SMU). If deemed appropriate, please forward to the CORE CIVIC (CC) Management Team for appropriate action.		
Personal Information		

1

On the Confinement Watch Log for 29MAY2018 @ 0200 hours the initials of the officer were missing.

The Detainee's middle name was missing on the Cell Contract, Rules & Regulations, Confinement Activity Record (CAR) and the Restrictive Housing Admission Checklist.

Personal Information

A continuation page for the Description of Incident on I-884, Incident of Prohibited Acts and Notice of Charges was missing.

A Supervisory Signature on I-884, Incident of Prohibited Acts and Notice of Charges was missing.

The Detainee's complete and correct name is Personal Information . Most if not all documents reflect

Personal Information

The titles of Reporting Officer and Supervisor on I-884, Incident of Prohibited Acts and Notice of Charges were missing. The titles of Unit Disciplinary Committee (UDC) Members on I-891, Unit Disciplinary Committee Report of Findings & Actions were missing.

The Detainee's middle name was missing on the I-893, Notice of Institution Disciplinary Panel (IDP) Hearing and Administrative Segregation Review, ICE Form I-885.

The reviewing officer could not locate Confinement Watch Logs for: 25MAY2018-26MY2018, 26MAY2018-27MAY2018 and 27MAY2018-28MAY2018.

Personal Information

The titles of the Reporting Officer and Supervisor were missing on the I-884, Incident of Prohibited Acts and Notice of Charges.

The reviewing officer could not locate Confinement Watch Logs for: 25MAY2018-26MY2018, 26MAY2018-27MAY2018.

Personal Information

The reviewing officer could not locate Confinement Watch Logs for: 25MAY2018-26MY2018, 26MAY2018-27MAY2018, 28MAY2018-29MAY2018.

Personal Information

The Allowable Personal Property Inventory Receipt was missing a Supervisory Signature.

The I-884, Incident of Prohibited Acts and Notice of Charges was not contained; the detainee was placed in the SMU for having committed a Disciplinary Infraction.

Personal Information

The reviewing officer could not locate Confinement Watch Logs for 23MAY2018-24MAY2018 & 24MAY2018-25MAY2018.

Personal Information

The Detainee was involved in an altercation, as a result he was hospitalized. Evidence of the timeframe in which he was offsite or any time spent in the Medical Housing Unit was not contained in the SMU folder.

There were 4 Disciplinary Reports with no disposition.

The middle name was missing from the following documents: Cell Contract, Rules & Regulations, Confinement Activity Record (CAR) and the Restrictive Housing Admission Checklist.

Personal Information

The SMU Folder contained the Confinement Watch Log completed on behalf of Detainee Personal Information for 24MAY2018-25MAY2018.

Personal Information

The SMU Folder contained a Confinement Watch Log with start date of 20MAY2018 and End Date of 18MAY2018. 20MAY2018 cannot precede 18MAY2018. Logs were not sequential, making it difficult to decipher which log required the amended dates.

Personal Information

The Detainee's middle name was missing on Rules and Regulations.

Personal Information

The reviewing officer could not locate the officer's initials on the Confinement Watch Log for 14MAY2018 @ 0958 hours.

Personal Information

A Supervisory Signature was missing on the Confinement Watch Log for 25MAY2018.

The SMU Folder was missing a completed Administrative Segregation Review for 25MAY2018.

Personal Information

A Special Needs Form reflecting release from the Medical Housing Unit was not contained in the SMU Folder; the Confinement Record reflects that the Detainee was discharged from the Mental Health Unit on 17MAY2018.

Personal Information

The reviewing officer could not locate the Confinement Watch log for 25MAY2018-26MAY2018, 26MAY2018-27MAY2018, 27MAY2018-28MAY2018.

Personal Information

The reviewing officer ould not locate the printed name of the Medical Staff Member on the Confinement Activity Record (CAR) for 08MAY2018.

The Segregation Order was not closed out; disciplinary Status was completed on 25MAY2018.

The reviewing officer could not determine justification for continued placement in the SMU, based on content of the SMU Folder, the matter was addressed via e-mail on 31MAY2018, with Facility Personnel; a response is pending.

Personal Information

The errors detected, originally reported on 17MAY2018 (via email) and subsequently reiterated (via email) are yet to be corrected.

Copies of photographs contained in the SMU folder require replacement, as one cannot decipher what in fact was photographed. ***ICE Compliance was provided with clear photos for the 210: Adulteration of Food or Drink violation.*** However, since copies of the photographs supplied for the 101: Assault violation remained unclear, they were not submitted as supporting documentation, when the case was reported via SRMS. Unclear photographs cannot be presented as evidence.

Personal Information

The violation code was not listed on the "Prohibited Acts" section listed as "Code" on the I-884, Incident of Prohibited Acts and Notice of Charges.

The reviewing officer could not locate the titles of the Reporting Officer or the Reviewing Supervisor, on the I-884,Incident of Prohibited Acts and Notice of Charges.

Should any concerns arise, please do not hesitate to advise.

Thank you,

Respectfully,